

## CLAIMS ONLY

Application Number  
10-031815

Filing Date

2/4/05

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep.	Depend.	Indep.	Depend.	Indep.	Depend.
	Indep	Depend	Indep.	Depend	Indep	Depend						
1	/											
2		/										
3		/										
4		/										
5		/										
6		/										
7		/										
8		/										
9		/										
10		/										
11		/										
12		/										
13		/										
14		/										
(15)	/											
16		/										
17		/										
18		/										
19		/										
20		/										
21		/										
(22)	/											
23		/										
24		/										
25		/										
26		/										
27		/										
28												
29												
30												
31												
32												
33												
34												
35												
36												
37												
38												
39												
40												
41												
42												
43												
44												
45												
46												
47												
48												
49												
50												
Total Indep	3											
Total Depend	24											
Total Claims	27											

BEST AVAILABLE COPY